THE PUBLIC AGENDA FOUNDATION

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COMMUNITY LEADERS'
ATTITUDES ABOUT
CHILD SURVIVAL
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COMMUNITY LEADERS' ATTITUDES ABOUT CHILD SURVIVAL

The results of a survey of leadership opinion.

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BACKGROUND AND INTRODUCTION

INTRODUCTION

This report of leadership thinking about Third World infant mortality represents the third phase of the Public Agenda Foundation's evaluation of the Child Survival Campaign on behalf of the Carnegie Corporation. By way of background, the Campaign is a cooperative national effort by several nonprofit agencies led by the U.S. Committee for UNICEF to alert and inform Americans about the silent emergency of Third World infant mortality and about methods that could readily reduce the number of children who die each day. The effort is led by National Honorary Co-Chairs former Presidents Jimmy Carter and Gerald Ford, and National Campaign Co-Chairs Father Theodore Hesburgh and Liv Ullmann.

The Public Agenda has, on behalf of the Carnegie Corporation, agreed to conduct a multi-faceted evaluation of this effort, including a pre- and postcampaign assessment of leadership thinking about the issue. This report details the results of a precampaign survey about Third World infant mortality conducted by the Public Agenda with 335 community leaders from five "model cities" (Atlanta, Philadelphia, Los Angeles, Minneapolis and Houston) where the Child Survival Campaign is focusing its efforts. This is the first of two leadership surveys to be conducted by the Public Agenda; it will be followed, at the end of 1987, with a postcampaign assessment among a similar group to measure attitude change and the effectiveness of the effort.

More specifically, this precampaign survey was designed to assess community leaders' views about Third World infant mortality, its causes and dimensions, and reactions to the GOBI strategy to reduce infant mortality as promoted by the Child Survival Campaign. The questionnaire asked leaders about the importance of reducing Third World infant mortality, measured their knowledge about the dimensions and causes of the problem, and, after providing information about the Child Survival Campaign and the GOBI strategy for reducing infant mortality, gauged reactions to various arguments related to the effort.

When the Child Survival Campaign is completed at the end of 1987, the Public Agenda will conduct a postcampaign assessment to again measure community leaders' attitudes; the postcampaign survey will assess the Campaign's success in alerting leaders to the problem of Third World infant mortality and informing them about the GOBI strategy for reducing it. The postcampaign assessment will use identical questions and a matched sample, including all of the leaders who responded to this survey.

The community leaders were chosen from five sectors: state, local and federal government; higher education, including universities, colleges and private and public high schools; the business community; the news media; and private associations and community organizations such as the Lions Club, the League of Women Voters, labor organizations such as the AFL-CIO, and health-related organizations including the March of Dimes and Blue Cross and Blue Shield.

A complete description of the leadership sample and the sampling parameters and technique can be found in the Part IV: Methodology. A copy of the questionnaire is attached in an Appendix to the report.

EXECUTIVE SUMMARY OF FINDINGS

EXECUTIVE SUMMARY

I: Leaders are unaware of the problem of Third World infant mortality, its dimensions and causes, and know virtually nothing about efforts to reduce it.

1. Leaders do not know about the Child Survival Campaign: Only 7% of the leaders surveyed had heard of the Child Survival Campaign.

2. Leaders do not know about "GOBI": An even smaller number, 4%, knew what "GOBI" is or about the strategy for reducing infant mortality rates.

3. Leaders underestimate the dimensions of the problem: 51% of the leaders said that the number of readily preventable infant deaths was much lower than the actual rate of 40,000 per day.

4. Leaders are seriously misinformed; large numbers think smallpox is a major cause of Third World infant mortality: 61% did not know that smallpox has been eradicated; 39% said it is a "major cause" of infant mortality in developing countries today and 36% were not sure.

5. Leaders do not know about other major causes of infant mortality: Large numbers also did not know that polio (70%), tuberculosis (57%), measles (52%) and diphtheria (45%) are major causes of Third World infant mortality.

II: Leaders strongly support the idea of reducing Third World infant mortality. While not much concerned about the effect of lower infant mortality on overpopulation or about helping children in "unfriendly" countries, leaders' support for the effort is strongest when private (as opposed to federal) money is used and when they think it will focus on infant mortality in the U.S. as well as in developing countries.

(NOTE: The questionnaire was designed to measure leaders initial attitudes; then information about GOBI and the Child Survival Campaign was provided and additional questions were asked. The findings below reflect both leaders' initial attitudes and their views after they learned more about the effort.)

6. Leaders strongly favor efforts to reduce infant mortality: Even though they are both unaware and misinformed about the problem, 92% of the leaders favored efforts to reduce infant mortality, and 72% strongly favored these efforts.

7. When given more information, leaders are optimistic about significantly reducing infant mortality by 1990: When leaders learned about the worldwide effort to reduce infant mortality and about the GOBI strategy, 64% were optimistic that these efforts would be successful and that infant mortality could be significantly reduced by 1990.

8. Leaders feel that the campaign should help children in all countries, including those that are "unfriendly" to the U.S.: 91% said that helping children in countries that are unfriendly to the U.S. was not an important consideration.

9. The threat of overpopulation does not reduce support for the effort: 88% rejected the argument that reducing infant mortality should not be a priority because it might increase world overpopulation.

10. In fact, leaders agree that infant mortality must be reduced before population growth can be slowed: 67% of the leaders surveyed agreed with the argument that infant mortality must be reduced before population growth can be slowed. Only 16% rejected this argument, and the rest were not sure.

11. However, support for the effort does fall somewhat when leaders consider its importance against pressing domestic needs: When asked whether the government could afford to support the Child Survival Campaign given U.S. domestic needs, 68% said the government could afford to do both. However, this percentage is noticeably smaller than the number saying they would support the effort when this issue was not raised.

12. In addition, leaders are nearly split on whether to support the campaign if it does not focus on infant mortality in the U.S.: While 46% said they would support the Child Survival Campaign even if it were exclusively an international effort, 37% said they would support the effort only if it focuses on infant mortality in the U.S. as well as in developing countries.

13. Leaders rank efforts to reduce infant mortality as a "top" priority for the use of private aid: Given a list of six competing humane activities for the use of private aid to developing countries (including reducing hunger, providing seed and equipment to farmers, building

hospitals, etc.), leaders ranked reducing infant mortality and reducing hunger as the most important, with 72% saying both should be a top priority.

14. However, leaders are less inclined to say that reducing infant mortality should be a top priority for the use of federal aid: Given a similar list of possible uses of federal aid, 59% said that reducing infant mortality should be a top priority -- a percentage that, while still high, is significantly lower than the number saying the effort should be a top priority for the use of private aid.

15. There is less support for the campaign in Houston than in the other four cities: 54% of the leaders in Houston said they "strongly" support efforts to reduce Third World infant mortality, compared to an average of 77% among leaders in the other four cities. Further, when ranking priorities, only 37% of the Houston leaders said that reducing infant mortality should be a top priority for the use of federal aid. Finally, leaders in Houston expressed considerably more concern about overpopulation than did leaders in other cities.

III: Leaders will endorse this effort in their role as leaders in their community.

16. Leaders will endorse the campaign and support the campaign in terms of their role in the community: 63% of the leaders surveyed in the five cities said they would "almost certainly" support this effort publicly in their role as community leaders.

DETAILED SUMMARY OF FINDINGS

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FINDING #1

Very few community leaders are aware of the Child Survival Campaign. Only 7% are familiar with the effort.

****

TABLE 1

AWARENESS OF THE CHILD SURVIVAL CAMPAIGN

Heard Of The Child Survival Campaign	Total %
Yes	7*
No	82
Not sure/no answer	11

* Represents those saying they had heard of the Campaign and described it correctly.

Q: "Have you ever heard of the Child Survival Campaign?"
(If 'YES') "Briefly describe what it is."

Detailed Observation

Leadership awareness of the Campaign is greatest in Atlanta.

TABLE 1-2

AWARENESS OF THE CHILD SURVIVAL CAMPAIGN

Heard Of The Child Survival Campaign	Total %	Atl %	Hst %	LA %	Minn %	Phila %
Yes*	10	20	8	7	8	4
No	79	69	78	79	83	89
Not sure/no answer	11	13	14	14	8	7

* Represents those saying they had heard of the Campaign and described it correctly.

Q: "Have you ever heard of the Child Survival Campaign?"
(If 'YES') "Briefly describe what it is."

Detailed Observation

Of those leaders who are aware of the Child Survival Campaign, only about one in three heard of the effort because of campaign events or publicity.

TABLE 1-3

HOW LEADERS LEARNED OF THE EFFORT

Heard Of CSC	Among Those Familiar With The Campaign % (n = 34)
Through campaign events, publicity	35
Because of professional responsibility (congressional hearings, seminars, etc.)	29
Through direct contact with campaign or staff	21
Personal involvement	15

Q: "How did you hear of the Child Survival Campaign?"

****

FINDING #2

Even fewer leaders have heard of GOBI. Only 4% knows what the acronym means.

****

TABLE 2

AWARENESS OF THE TERM GOBI

Heard Of GOBI	Total %
Yes*	4
No	88
Not sure/no answer	8

* Represents those saying they had heard of GOBI and described it correctly.

Q: "Have you ever heard of the term GOBI?"
(If 'YES'): "Briefly describe what the letters stand for."

Detailed Observation

As is true about the Campaign in general, awareness of GOBI was highest among leaders in Atlanta.

TABLE 2-1

AWARENESS OF THE TERM "GOBI"

Heard Of "GOBI"	Total %	Atl %	Hst %	LA %	Minn %	Phila %
Yes*	4	13	3	4	3	1
No	88	79	89	86	87	94
Not sure/no answer	8	7	8	10	9	5

* Represents those saying they had heard of GOBI and described it correctly.

Q: "Have you ever heard of the term GOBI?"
(If 'YES'): "Briefly describe what the letters stand for."

****

FINDING #3

Community leaders were largely unaware of the dimensions of Third World infant mortality. A majority underestimates the number of deaths per day and 11% have no idea what the rate is.

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TABLE 3

ESTIMATES OF THE RATE OF READILY PREVENTABLE INFANT MORTALITY IN DEVELOPING COUNTRIES

Number Of Deaths Per Day	Total %	
Less than 5,000	26	
5,000 to 10,000	15	>51
10,000 to 20,000	10	
30,000 to 50,000 (CORRECT ANSWER IS 40,000)	13	
50,000 to 100,000	8	>19
100,000 or more	11	
Other	7	
Don't know/no answer	11	

Q: "The World Health Organization recently estimated the number of infants in developing countries who die every day from easily preventable causes. What do you think that number is?"

****

FINDING #4

Many community leaders are also uninformed about the major causes of infant mortality. For example, only one in four knows that smallpox has been eradicated and 36% are not sure.

****

TABLE 4

PERCEPTIONS ABOUT SMALLPOX AS A CAUSE OF INFANT MORTALITY

A Major Cause of Infant Mortality	"No" or "Not Sure/N.A."* %
Smallpox	61

* The table below shows the complete breakdown.

A Major Cause of Infant Mortality	Yes %	No %	Not Sure/N.A. %
Smallpox	39	25	36

Q: "Smallpox is a major cause of Third World infant mortality that could be easily prevented -- Agree or disagree?"

****

FINDING #5

Upwards of 45% do not know if polio, diphtheria, tuberculosis, and measles are major causes of infant mortality that can be easily prevented.(The percentage saying these diseases are not major causes was combined with those saying they "aren't sure" to arrive at this number.)

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TABLE 5

PERCEIVED EASILY PREVENTABLE CAUSES OF INFANT MORTALITY

Major Causes	"No" or "Not Sure/N.A."* %
Polio	70
Tuberculosis	57
Measles	52
Diphtheria	45

* The table below shows the complete breakdown.

Major Causes	Yes %	No %	Not Sure/N.A. %
Diphtheria	56	8	37
Measles	47	11	41
Tuberculosis	43	14	43
Polio	30	23	47

Q: "Diphtheria/measles/tuberculosis/polio...
...is a major cause of Third World infant mortality that could be easily prevented -- Agree or disagree?"

****

FINDING #6

In addition, only 45% are aware that the greatest readily preventable cause of Third World infant mortality is poor healthcare.

****

TABLE 6

PERCEIVED GREATEST PREVENTABLE CAUSE OF INFANT MORTALITY

Perceived Cause	Total %
Poor healthcare (e.g., Lack of medicine, immunization, poor hygiene, etc.)	45
Hunger, starvation, poverty, etc.	44
Other	8
Don't know/no answer	4

Q: "What do you think is the greatest preventable cause of infant mortality?"

****

FINDING #7

In spite of their ignorance about the dimensions and causes of infant mortality, 92% support efforts to reduce infant mortality rates, and 72% strongly favor such efforts.

****

TABLE 7

VIEWS ABOUT EFFORTS TO REDUCE THIRD WORLD INFANT MORTALITY

Views About Efforts	Total %	
Strongly favor	72	>92
Somewhat favor	20	
Somewhat oppose	1	
Strongly oppose	1	
Not sure/no answer	6	

Q: "How strongly do you favor efforts to reduce Third World infant mortality?"

****

FINDING #8

After learning about GOBI, nearly two-thirds say it is realistic to think that infant mortality could be significantly reduced by the year 1990.

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TABLE 8

IN LIGHT OF GOBI, VIEWS ABOUT WHETHER THIRD WORLD INFANT MORTALITY CAN BE SIGNIFICANTLY REDUCED BY 1990

Significant Reduction By 1990	Total %
Yes, is realistic	64
No, is not realistic	20
Not sure/no answer	16

Q: "In your opinion, is it realistic to think that Third World infant mortality could be significantly reduced by the year 1990?"

****

FINDING #9

Of those saying infant mortality can be significantly reduced by 1990, most point out that the cures, medicine and resources are available or express confidence in the GOBI strategy.

****

TABLE 9

REASONS WHY THIRD WORLD INFANT MORTALITY CAN BE REDUCED BY THE YEAR 1990

Reasons	Among Those Who Say It Is Possible % (n = 215)
Cures/medicine/resources are available	29
Possible with proper approach (i.e., GOBI), funds, and adequate commitment by countries, charitable organizations involved in effort	26
GOBI is easy, possible, well planned, has been effective in the past	19
Information exists on how to solve the problem	5
Increased publicity and public concern will focus attention on problem	3
Solutions are inexpensive	3
Other*	4
No answer	11

* Including: "If an international effort," "If we increase economic growth," "If we start now," etc.

Q: "Why do you feel that it is realistic to think that Third World infant mortality could be significantly reduced by the year 1990?"

****

FINDING #10

Even among those who say Third World infant mortality can not be significantly reduced by 1990, about one in four says the goal can be achieved within a longer period of time.

****

TABLE 10

PERCEIVED REASONS WHY THIRD WORLD INFANT MORTALITY CANNOT BE REDUCED BY 1990

Reasons Why Significant Reductions Cannot Be Achieved By 1990	Subset Of Those Who Feel It Is Not Possible % (n = 121)
Possible, but not by 1990	26
Political/cultural barriers are too great	21
Lack of money, financial support	12
Question CSC ability/purpose	7
People are apathetic	7
Lack of information, concern	6
World is already overpopulated	5
Other*	3
No answer	13

* Including: "Past efforts failed," "Geographic isolation," "GOBI is wrong approach," "Low priority for businesses and governments," etc.

Q: "Why do you feel that it is unrealistic to think that Third World infant mortality could be significantly reduced by the year 1990?"

****

FINDING #11

To determine what they saw as key factors in deciding whether to support the effort, leaders were asked to react to various arguments. For example, leaders were asked about helping children in countries that are unfriendly to the United States; 91% said this will not be a factor in deciding whether they'll support the Child Survival Campaign.

****

TABLE 11

SAVING CHILDREN IN UNFRIENDLY COUNTRIES AS A FACTOR IN DETERMINING SUPPORT FOR THE CAMPAIGN

Views About Helping Children In Unfriendly Countries	Total %
The Campaign should not be weighed in terms of international politics	91
Oppose the Campaign because it will help children in unfriendly countries	3
Other	3
Not sure/no answer	3

Q: "Which comes closer to your own view?

A. I oppose the Child Survival Campaign because it will help children in countries that aren't friendly to the U.S.

or

B. Children's lives should not be weighed in terms of international politics, and so this issue will not determine whether or not I support the campaign."

****

FINDING #12

Nearly nine leaders in ten say the threat of world overpopulation is not a factor in determining their support for the Campaign.

****

TABLE 12

WORLD POPULATION AS A FACTOR IN DETERMINING SUPPORT FOR THE CAMPAIGN

Views About The Importance of World Population	Total %
The issue of world population is not a factor	88
Oppose effort because it will increase world population	4
Other*	6
Not sure/no answer	5

* Includes some who objected to the question, saying the relationship is complicated because of links to birth control, family planning, etc.

Q: "Which statement about the Child Survival Campaign is closer to your view?

A. I oppose the effort because it will increase world population.
or
B. The issue of world population will not determine whether I support this effort or not; other considerations are more important."

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FINDING #13

In addition, more than two leaders in three feel that infant mortality must be reduced before population growth can be slowed.

****

TABLE 13

VIEWS ABOUT THE NEED FOR REDUCING INFANT MORTALITY BEFORE POPULATION GROWTH CAN BE SLOWED

Infant Mortality Must Be Reduced Before Population Growth Is Slowed	Total %
Agree	67
Disagree	16
Not sure/no answer	16

Q: "Advocates of the Child Survival Campaign argue that in the long run, the effort will not increase world population. They say that in countries such as China, Sri Lanka, Korea, Costa Rica and Singapore where the birth rate has leveled off, the infant mortality rate has declined first because parents feel less need to have extra children when they're confident their children will survive. These advocates argue that we must reduce infant mortality before we can slow population growth. Does this sound like a valid argument or not?"

****

FINDING #14

However, leaders' support does fall somewhat when they consider the effort against domestic needs. Even though 68% say that in spite of our domestic needs, the government can afford to support this effort, this percentage is lower than the number answering in terms of other considerations.

****

TABLE 14

DOMESTIC NEEDS
AS A FACTOR IN DETERMINING SUPPORT FOR THE CAMPAIGN

Comparative Importance of Domestic Needs	Total %
Domestic needs should not determine whether to support this effort or not	68
Domestic needs are too great to support this effort	9
Campaign is a good idea, but must learn more about specifics on budget, spending before support (Vol.)	10
Could be afforded if domestic priorities were reordered (Vol.)	5
Other	3
Not sure/no answer	5

Q: "Some people say that in view of our domestic needs and the budget deficit, we should not spend federal money on humanitarian projects in developing countries. Others say that if we can reduce infant mortality inexpensively and effectively, we should use federal money to do so, even given the deficit and other domestic needs. How do you feel?"

****

FINDING #15

Leaders are split about whether the Child Survival Campaign must focus on infant mortality in the U.S. as well as in developing countries. While 46% will support the effort even if it is exclusively international, 31% will support the effort only if it focuses on infant mortality in the U.S. as well as in developing countries.

****

TABLE 15

VIEWS ABOUT INCLUDING THE U.S. AS A FACTOR IN DETERMINING SUPPORT FOR THE CAMPAIGN

Views About Focusing on Infant Mortality in the U.S.	Total %
Whether the U.S. is included is not a factor in determining my support for the effort	46
U.S. must be included	31
Not sure/no answer	12
Support regardless, but prefer domestic component (Vol.)	6
Other	4
Do not support the effort	2

Q: "Which statement is closer to your own view?

A. I'll support the Child Survival Campaign only if it focuses on infant mortality in the U.S. as well as in the Third World.

or

B. Very little infant mortality in the U.S. is due to causes GOBI will focus on, and so this issue will not determine whether or not I support the campaign."

****

FINDING #16

A solid majority feels that reducing infant mortality is a top priority for the use of private aid to developing countries. Given a list of activities, most leaders say reducing infant mortality and providing surplus food to help relieve hunger should be top priorities.

****

TABLE 16

PRIORITIES FOR THE USE OF PRIVATE AID

Uses for Private Aid	Priority Rating Top %	Middle %	Low %	N.S./N.A. %
Help countries lower infant death rates	**72**	**19**	**4**	**5**
Provide surplus food to help reduce hunger	72	17	6	5
Help farmers buy seed and basic equipment	55	30	10	6
Control world population	42	25	26	8
Provide long term assistance by building roads, dams, and hospitals	33	36	24	7
Provide direct financial assistance so countries can pay their debts	7	14	65	14

Q: "Recognizing that we can't do everything, give each activity below a priority for assistance to developing countries using private aid."

****

FINDING #17

Given a similar list of uses for federal aid, a lower number says reducing infant mortality should be a top priority: 59% for federal aid compared to 72% for private aid (see Finding #16). However, compared to other possible uses, only reducing hunger is ranked higher.[1]

****

TABLE 17

PRIORITIES FOR THE USE OF FEDERAL AID

Uses for Federal Aid	Priority Rating: Top %	Middle %	Low %	N.S./N.A. %
Provide surplus food to help reduce hunger	69	24	4	4
Help countries lower infant death rates	59	29	6	5
Help farmers buy seed and basic equipment	54	33	7	6
Provide long term assistance by building roads, dams, and hospitals	41	44	9	5
Control world population	39	27	25	8
Provide military aid to strategically important countries, including renting land for US bases	19	32	41	6
Provide direct financial assistance so countries can pay their debts	6	24	55	14

Q: "Recognizing that we can't do everything, give each activity below a priority for assistance to developing countries using federal aid."

[1] This result about the use of federal and private aid is consistent with the public's attitudes. (See pg. 43 of Infant Mortality in the Third World: The Public's Reactions to the Child Survival Campaign, The Public Agenda Foundation, March, 1986.)

****

FINDING #18

There is somewhat less support for the Campaign in Houston than in the other four "model cities." For example, 54% of the leaders in Houston strongly support efforts to reduce Third World infant mortality, compared to an average 77% among leaders in the other four cities.

********** **********

TABLE 18-1

VIEWS ABOUT EFFORTS TO REDUCE 3RD WORLD INFANT MORTALITY

Overall View	Four City Average %	Hst %	Atl %	LA %	Minn %	Phila %
Strongly favor	77	54	80	82	67	77
Somewhat favor	19	25	11	16	28	21
Somewhat oppose	2	4	2	2	--	2
Strongly oppose	--	5	--	--	--	--
Not sure/no answer	3	13	8	--	5	--

Q: "How strongly do you favor efforts to reduce Third World infant mortality?"

Detailed Observation

Houston leaders are also less likely to say that reducing infant mortality should be a top priority. Just over half of them name this as a top priority for the use of private aid, compared to an average of 76% in the other model cities.

TABLE 18-2

REDUCING INFANT MORTALITY IS A TOP PRIORITY USING PRIVATE AID

A "Top Priority" Use of Private Aid	Four City Average %	Hst %	Atl %	LA %	Minn %	Phila %
Helping countries lower infant death rates is a top priority	76	53	79	83	72	69

Q: "Recognizing that we can't do everything, give this activity a priority for assistance to developing countries using private aid."

Detailed Observation

And when asked about using federal aid, only 37% of the Houston leaders ranked reducing infant mortality as a top priority, compared to an average of nearly two-thirds of the leaders in the other model cities.

TABLE 18-3

REDUCING INFANT MORTALITY IS A TOP PRIORITY USING FEDERAL AID

A "Top Priority" Use of Federal Aid	Four City Average %	Hst %	Atl %	LA %	Minn %	Phila %
Helping countries lower infant death rates is a top priority	64	37	70	74	59	53

Q: "Recognizing that we can't do everything, give this activity a priority for assistance to developing countries using federal aid."

Detailed Observation

Houston leaders are also somewhat more concerned about domestic needs.

TABLE 18-4

VIEWS ABOUT THE COMPARATIVE IMPORTANCE OF DOMESTIC NEEDS TO HUMANITARIAN PROJECTS IN DEVELOPING COUNTRIES

Comparative Importance of Domestic Needs	Four City Average %	Hst %	Atl %	LA %	Minn %	Phila %
Domestic needs should not determine whether to support this effort	68	56	70	67	67	77
Domestic needs are too great to support effort	9	18	5	5	5	6
Good idea, but must learn more about budget, etc. before support (Vol.)	10	9	5	16	7	3
Could be afforded if priorities were reordered (Vol.)	5	4	8	2	7	4
Other*	3	11	5	9	6	1
Not sure/no answer	5	4	7	--	7	8

* Includes: "Only through volunteer fundraising--not taxation;" "Support if an international effort."

Q: "Some people say that in view of our domestic needs and the budget deficit, we should not spend federal money on humanitarian projects in developing countries. Others say that if we can reduce infant mortality inexpensively and effectively, we should use federal money to do so, even given the deficit and other domestic needs. How do you feel?"

Detailed Observation

Finally, a comparatively large number of Houston leaders oppose the effort because it might increase world population. In the other model cities, no more than 2% feel that this is a reason not to support the effort.

TABLE 18-5

WORLD POPULATION AS A FACTOR IN DETERMINING SUPPORT FOR THE CHILD SURVIVAL CAMPAIGN

World Population As A Factor For Support For CSC	Four City Average %	Hst %	Atl %	LA %	Minn %	Phila %
The issue of world population is not a consideration	87	82	87	93	86	83
Oppose effort because will increase world population	1	14	--	2	1	2
Other*	6	4	3	4	8	10
Not Sure/No Answer	6	--	11	2	5	4

Q: "Which statement about the Child Survival Campaign is closer to your view?

A. I oppose the effort because it will increase world population.
or
B. The issue of world population will not determine whether I support this effort or not; other considerations are more important."

****

FINDING #19

About nine in ten leaders from all leadership categories favor efforts to reduce Third World infant mortality. However, the percentage who strongly favor these efforts is comparatively low among corporate leaders.

****

TABLE 19

VIEWS ABOUT EFFORTS TO REDUCE THIRD WORLD INFANT MORTALITY

Overall View	Total %	Assoc %	Corp %	Educ %	Govt %	Media %
Strongly favor	72	77	50	81	91	74
Somewhat favor	20	16	34	16	9	19
Somewhat oppose	1	1	3	1	--	2
Strongly oppose	1	--	3	--	--	2
Not sure/no answer	6	5	11	3	--	4

Q: "How strongly do you favor efforts to reduce Third World infant mortality?"

****

FINDING #20

Only a small number of leaders from all types of organizations oppose this effort because of the threat of world overpopulation.

****

TABLE 20

WORLD POPULATION AS A FACTOR IN LEADERS' SUPPORT FOR THE CHILD SURVIVAL CAMPAIGN

World Population As A Factor For Support For CSC	Total	Assoc	Corp	Educ	Govt	Media
	%	%	%	%	%	%
The issue of world population is not a determining factor	88	97	82	95	97	81
Oppose effort because it will increase world population	4	1	8	3	--	5
Other	6	3	3	--	--	2
Not sure/no answer	5	3	7	3	--	7

Q: "Which statement about the Child Survival Campaign is closer to your view?

A. I oppose the effort because it will increase world population.
or
B. The issue of world population will not determine whether I support this effort or not; other considerations are more important."

****

FINDING #21

Corporate leaders are less likely to say that the government can afford to support efforts to reduce Third World infant mortality in spite of domestic needs. Only 47% of the corporate leaders say the government can do both, compared to 79% among government leaders and 65% among media leaders.

****

TABLE 21

VIEWS ABOUT THE COMPARATIVE IMPORTANCE OF DOMESTIC NEEDS TO HUMANITARIAN PROJECTS IN DEVELOPING COUNTRIES

Comparative Importance of Domestic Needs	Total %	Corp %	Assoc %	Educ %	Govt %	Media %
Domestic needs should not determine whether to support this effort	68	47	75	74	79	65
Domestic needs are too great to support this effort	9	9	3	6	--	12
Good idea, but must learn more specifics about budget, spending (Vol.)	10	11	5	6	6	9
Can be afforded if budget priorities are reordered (Vol.)	5	3	10	5	3	2
Other*	3	18	2	3	9	4
Not sure/no answer	5	11	4	3	3	7

*Includes: "Only through volunteer efforts;" "If an international effort."

Q: "Some people say that in view of our domestic needs and the budget deficit, we should not spend federal money on humanitarian projects in developing countries. Others say that if we can reduce infant mortality inexpensively and effectively, we should use federal money to do so, even given the deficit and other domestic needs. How do you feel?"

****

FINDING #22

Leaders from all groups feel that lowering infant mortality rates in Third World countries is a top priority. However, leadership support for the effort is greater when using private rather than federal aid.

****

TABLE 22-1

PRIORITY FOR REDUCING INFANT MORTALITY USING PRIVATE AID

A Top Priority for the Use of Private Aid	Total %	Assoc %	Corp %	Educ %	Govt %	Media %
Helping countries lower infant death rates	72	81	68	78	71	67

Q: "Recognizing that we can't do everything, give each activity below a priority for assistance to developing countries using private aid."

TABLE 22-2

PRIORITY FOR REDUCING INFANT MORTALITY USING FEDERAL AID

A Top Priority for the Use of Federal Aid	Total %	Assoc %	Corp %	Educ %	Govt %	Media %
Helping countries lower infant death rates	59	73	50	64	59	54

Q: "Recognizing that we can't do everything, give each activity below a priority for assistance to developing countries using federal aid."

****

FINDING #23

Nearly two-thirds say they will support the Child Survival Campaign in their role as leaders in their community.

****

TABLE 23

SUPPORT FOR THE CHILD SURVIVAL CAMPAIGN IN THEIR COMMUNITY

Support As Leaders In Their Community	Total %
Would support	63
Would not support	12
Not sure/no answer	25

Q: "Is the Child Survival Campaign something you would support as a community leader?"

****

FINDING #24

While majorities in every city say they will back the campaign, support among Los Angeles leaders is especially strong.

****

TABLE 24

SUPPORT FOR THE CHILD SURVIVAL CAMPAIGN AS LEADERS IN THEIR COMMUNITY

Support As Leaders In Their Community	Total %	LA %	Atl %	Hst %	Minn %	Phila %
Would support	63	81	69	53	52	63
Would not support	12	7	7	18	16	12
Not sure/no answer	25	13	24	27	30	25

Q: "Is the Child Survival Campaign something you would support as a community leader?"

****

FINDING #25

Large numbers of leaders are willing to become involved in the campaign in a variety of ways.

****

TABLE 25

ACTIVITIES THAT LEADERS ARE WILLING TO DO

Activities	Total* %
Distribute materials about the effort	38
Support increased federal aid for the effort	34
Represent the effort or endorse it publicly	33
Raise money or contribute to the effort	18
Hold an informational meeting on the campaign	14
Get their organization to work for the campaign	14
Other	6
Not sure/no answer	31

* Percentage totals more than 100 due to multiple answers.

Q: "Which of the following would you be likely to do?"

****

FINDING #26

However, leaders from each of the five model cities are not sure what their community's response to the effort will be.

****

TABLE 26

COMMUNITY LEADERS' PERCEPTION OF THEIR COMMUNITY'S ATTITUDE TOWARDS THE CHILD SURVIVAL CAMPAIGN

Perceptions About the Community's View of The Campaign	Total %	Atl %	Hst %	LA %	Minn %	Phila %
Would support	42	42	47	48	42	35
Would not support	8	9	10	4	5	18
Not sure/no answer	50	49	41	50	55	45

Q: "Is this effort something that you think people in your community would support?"

****

FINDING #27

Leaders' uncertainty about their community's reaction stems from their views about competing causes and questions about the Campaign's publicity and visibility.

****

TABLE 27

REASONS WHY LEADERS ARE UNSURE HOW PEOPLE WILL REACT TO THE CHILD SURVIVAL CAMPAIGN

Perceived Reasons Why People May Not Support the Campaign	Among Those Unsure Of Their Community's Reaction % (n = 168)
There are so many competing priorities/causes	28
Not sure of community attitudes	28
Depends on publicity/presentation	25
People in the community are apathetic	5
People in the community are selfish	5
People in community are not socially aware	5
Don't know, not involved with the community	5

Q: "Why do you say this effort is something that you think people in your community would or would not support?"

METHODOLOGY

METHODOLOGY

To assess leaders' views about efforts to reduce Third World infant mortality and about the Child Survival Campaign, the Public Agenda Foundation conducted a self-administered survey through the mail to 335 community leaders in five cities: Atlanta, Houston, Los Angeles, Minneapolis, and Philadelphia. Individually addressed letters of introduction describing the Public Agenda and the general purpose of the survey were sent to each respondent; these letters were followed by a second mailing that included the questionnaire and a stamped, addressed return envelope. No incentive was offered. Following the mailing of the questionnaire, reminder letters and follow-up telephone calls were made to those who had not responded within three weeks.

Since the Child Survival Campaign did not begin to attract wide public attention until the fall of 1986, the Public Agenda had ample time to sample leaders' precampaign opinions. Four mailings were sent out between March 1 and August 31, 1986. The first mailing was to a list of the names of 800 community leaders provided to the Public Agenda by Child Survival Campaign staff. Initial assessments were that the response rate was slow, especially among leaders in the news media and business community; and so the Public Agenda compiled a supplemental list of 150 media and business leaders in the five cities and sent them the introductory letter followed by the questionnaire in April, 1986. In spite of follow-up letters and phone calls made through May, the response rate was still unacceptably low and so the Public Agenda compiled two additional lists and sent out supplemental mailings to 600 and 100 community leaders in June and August respectively; follow-up calls reminding leaders about the survey and asking them to send it back were made throughout the summer. Respondents were chosen using the sampling criteria described below.

Sampling Criteria: As with any leadership sample, the universe of whom to sample is not self-defining since there is not absolute agreement about who is a community "leader." Therefore, decisions about whom to interview require that criteria be defined and operationalized. The criteria used to identify leaders for this survey are as follows:

1. Government Leaders had to be an:
   a. Elected official including a mayor, city council member, state senator or representative, or a member of Congress; or an
   b. Appointed official including major department or agency heads from the model city (or immediate area).

2. Leaders from Higher Education had to be either a:
   a. College or university president, chancellor, provost, or dean; or a
   b. High school or secondary school superintendent, school board member, or principal.

3. Corporate Leaders had to be both a:
   a. Chairman, chief executive officer, president, or vice president;
   b. And from a firm with no fewer than 10,000 employees in the model city or immediate area.

4. Media Leaders had to be either:
   a. The editor, managing editor, or editorial page editor of a major newspaper serving the area; or
   b. The general manager, program director or news directors of a major television and radio station serving the area.

Association and community organization leaders included the director, president or senior executive from:

a. Charitable organizations such as the Salvation Army or Red Cross;
b. Community groups such as the Boy Scouts and the YMCA;
c. Service groups such as the Rotary and Lions Club;
d. Labor unions including the AFL-CIO and major locals;
e. Civic groups such as the League of Women Voters;
f. Advocacy organizations including civil rights groups such as the NAACP, women's groups such as NOW, and organizations for the elderly or handicapped.

Sample Composition:

Below is a breakdown of the 335 leadership respondents by city and category or segment.

Number of Completed Interviews by City	Percent of Sample
TOTAL = 335	100%
Minneapolis = 86	26%
Philadelphia = 73	22%
Atlanta = 66	20%
Los Angeles = 56	17%
Houston = 54	16%

Number of Completed Interviews by Segment	Percent of Sample
TOTAL = 335	100%
Associations = 102	30%
Education = 73	22%
Business = 67	20%
News media = 57	17%
Government = 35	10%
No answer = 1	<1%

APPENDIX

Questionnaire Number
-1 -2 -3

COMMUNITY LEADERSHIP SURVEY

Dear Community Leader:

In cooperation with the Carnegie Corporation, the Public Agenda Foundation, a New York-based nonprofit, nonpartisan research and educational organization, is conducting a survey of community leaders' attitudes about an issue of international importance.

This questionnaire is designed to take only a few minutes for you to answer. Please circle your answers, then put the completed questionnaire in the enclosed stamped envelope and mail it to the Public Agenda. Your answers will be strictly confidential. However, a summary of the results will be available to you upon request. Thank you in advance for your help with this important effort.

(For more information contact Chris Murdock or Judy Kallick at The Public Agenda.)

PLEASE DO NOT LOOK AHEAD IN THE QUESTIONNAIRE
(Information is provided about certain items later in the survey. To assess what leaders are aware of at the present time, we ask that you not look ahead. Thank you.)

Background Information: To help us keep track of who has replied, please answer the background questions below.

_____ -4
(Name)

_____ -5
(Organization)

_____ -6
(Position or Title)

_____

_____ -7
(Mailing Address and Zip Code)

( ) _____ -8
(Phone Number)

Part I: Many of the first questions involve awareness. To help us make an accurate assessment, please answer in terms of your current knowledge. Just circle your answers. PLEASE DO NOT LOOK AHEAD IN THE QUESTIONNAIRE.

1. The World Health Organization recently estimated the number of infants in developing countries who die every day from easily preventable causes. What do you think that number is? (Write your estimate on the line below.)

_____ 9-10

2. How strongly do you favor efforts to reduce Third World infant mortality?

a. Strongly favor.....11 -1
b. Somewhat favor.....-2
c. Somewhat oppose.....-3
d. Strongly oppose.....-4
e. I'm really not sure.....-5

Which of the following do you think are major causes of Third World infant mortality that could be easily prevented?

	Yes	No	Not Sure
3. Polio.....12	-1	-2	-3
4. Diphtheria.....13	-1	-2	-3
5. Dehydration caused by diarrhea.....14	-1	-2	-3
6. Tuberculosis.....15	-1	-2	-3
7. Smallpox.....16	-1	-2	-3
8. Measles.....17	-1	-2	-3

9. What do you think is the greatest preventable cause of infant mortality?

_____ 18-19
(Write in your answer above.)

10. Have you ever heard of the "Child Survival Campaign?"

a. Yes.....20 -1 -- Please answer 10b and 10c
b. No.....-2 -- Go to Q. 11
c. I'm really not sure.....-3 -- Go to Q. 11

10b. Briefly describe what it is. _____

_____ 21-22

10c. How did you hear of it? _____

_____ 23-24

11. Have you ever heard the term "GOBI?" (The acronym, not the desert.)

a. Yes.....25 -1 -- Please answer 11b
b. No.....-2 -- Go to Q. 12
c. I'm really not sure.....-3 -- Go to Q. 12

11b. Briefly describe what the letters stand for. _____

_____ 26-27

PART II: Please read the Background information about the Child Survival Campaign and the "GOBI" strategy to reduce Third World infant mortality, then answer the questions below.

Background: The Child Survival Campaign is an international effort to reduce infant mortality in developing countries through a four part strategy with the acronym "GOBI."

"G" -- Growth monitoring: teaching parents to monitor their baby's height and weight through the use of an inexpensive growth chart;

"O" -- Oral rehydration therapy: teaching parents to give children a salt and water solution when their children get diarrhea, thereby preventing dehydration caused by diarrhea, the single biggest killer of infants in developing countries;

"B" -- Breast-feeding: encouraging mothers to breast-feed their babies;

"I" -- Immunizing children against six diseases (polio, TB, diphtheria, measles, whooping cough and tetanus) with the goal of "universal immunization" against these diseases by the year 1990.

The World Health Organization estimates that each day, 40,000 children die from the causes GOBI would prevent. The goal of the Child Survival Campaign is to cut that number in half by the year 1990.

---

12. In your opinion, is it realistic to think that Third World infant mortality could be significantly reduced by the year 1990?

a. Yes.....28 -1
b. No.....-2 > Please answer 12b
c. I'm really not sure.....-3

12b. Why do you feel that way? _____

_____ 29-30

---

13. Some people say that in view of our domestic needs and the budget deficit, we should not spend federal money on humanitarian projects in developing countries. Others say that if we can reduce infant mortality inexpensively and effectively, we should use federal money to do so, even given the deficit and other domestic needs. How do you feel?

a. Our domestic needs are too great to support this effort.....31 -1
b. Our domestic needs should not determine whether to support this effort or not; other considerations are more important.....-2

c. Other _____ -3
(Please Specify)
d. I'm really not sure.....-4

14. Which statement about the Child Survival Campaign is closer to your view?

A. I oppose the effort because it will increase world population.
or
B. The issue of world population will not determine whether I support this effort or not; other considerations are more important.

a. Statement A is closer to my own view.....32 -1
b. Statement B is closer to my own view.....-2

c. Other_____-3
(Please Specify)
d. I'm really not sure.....-4

15. Advocates of the Child Survival Campaign argue that in the long run, the effort will not increase world population. They say that in countries such as China, Sri Lanka, Korea, Costa Rica and Singapore where the birth rate has leveled off, the infant mortality rate has declined first because parents feel less need to have extra children when they're confident their children will survive. These advocates argue that we must reduce infant mortality before we can slow population growth. Does this sound like a valid argument or not?

a. Yes, it sounds like a valid argument.....33 -1
b. No, it does not sound like a valid argument.....-2
c. I'm really not sure.....-3

16. Which statement is closer to your own view?

A. I'll support the Child Survival Campaign only if it focuses on infant mortality in the U.S as well as in the Third World.
or
B. Very little infant mortality in the U.S. is due to causes GOBI will focus on, and so this issue will not determine whether or not I support the campaign.

a. Statement A is closer to my own view.....34 -1
b. Statement B is closer to my own view.....-2

c. Other_____-3
(Please Specify)
d. I'm really not sure.....-4

17. Which statement comes closer to your own view?

A. I oppose the Child Survival Campaign because it will help children in countries that aren't friendly to the U.S.
or
B. Children's lives should not be weighed in terms of international politics, and so this issue will not determine whether or not I support the campaign.

a. Statement A is closer to my own view.....35 -1
b. Statement B is closer to my own view.....-2

c. Other_____-3
(Please Specify)
d. I'm really not sure.....-4

Recognizing that we can't do everything, give each activity below a priority for assistance to developing countries using federal aid.

Priority for this activity using federal aid	Top	Middle	Low	Not Sure
18. Provide military aid to strategically important countries, including renting land for U.S. bases...36	-1	-2	-3	-4
19. Provide long term assistance by building roads, dams, and hospitals.....37	-1	-2	-3	-4
20. Provide surplus food to help reduce hunger.....38	-1	-2	-3	-4
21. Control world population.....39	-1	-2	-3	-4
22. Help farmers buy seed and basic equipment.....40	-1	-2	-3	-4
23. Provide direct financial assistance so countries can pay their debts.....41	-1	-2	-3	-4
24. Help countries lower infant death rates.....42	-1	-2	-3	-4

Now rate each in terms of the use of private aid by charitable organizations.

Priority for this activity using private aid	Top	Middle	Low	Not Sure
25. Provide long term assistance by building roads, dams, and hospitals.....43	-1	-2	-3	-4
26. Provide surplus food to help reduce hunger.....44	-1	-2	-3	-4
27. Control world population.....45	-1	-2	-3	-4
28. Help farmers buy seed and basic equipment.....46	-1	-2	-3	-4
29. Provide direct financial assistance so countries can pay their debts.....47	-1	-2	-3	-4
30. Help countries lower infant death rates.....48	-1	-2	-3	-4

Additional Background: The Child Survival Campaign is already underway; in the past year, millions of children in South America, Africa and Asia have been immunized against six diseases, and thousands of trained volunteers in various countries are teaching parents about GOBI, including how to treat dehydration caused by diarrhea. Answer these final questions in view of this information.

---

31. Is this effort something you would support as a community leader?

a. Almost certainly.....49 -1 -- Please answer 31b
b. Probably not .....-2 -- Go to Q. 32
c. I'm really not sure .....-3 -- Go to Q. 32

31b. Which of the following would you be likely to do? (Mark those activities you'd be likely to do. Leave blank those you would not.)

I would:

_____ (50-1) Hold a meeting for people to learn about the campaign?
_____ (-2) Distribute materials about the effort?
_____ (-3) Represent the effort or endorse it publicly?
_____ (-4) Support increased federal aid for this effort?
_____ (-5) Raise money or contribute to the effort?
_____ (-6) Get my organization to work for the Child Survival Campaign?

_____ (-7) Other (Specify)_____

32. Is this effort something your organization might take on as a project?

a. Almost certainly.....51 -1
b. Probably not.....-2 > Please answer 32b
c. I'm really not sure at this time.....-3
d. Does not apply to my situation.....-4

32b. Why do you say that? _____

_____ 52-53

33. Is this effort something that you think people in your community would support?

a. Almost certainly.....54 -1
b. Probably not .....-2 > Please answer 33b
c. I'm really not sure at this time.....-3

33b. Why do you say that? _____

_____ 55-56

34. Is there anything else you'd like to add about either the effort to reduce Third World infant mortality or about this questionnaire?

_____

_____ 57-58

That ends the survey. Please put your completed questionnaire in the enclosed envelope and mail it to the Public Agenda. Thank you for your help with this important research effort.

* This questionnaire is strictly confidential. Your answers will not be forwarded to any other organization. But if you would like more information about the Child Survival Campaign, including how you can volunteer, contact:

The Child Survival Campaign
U.S. Committee for UNICEF
331 East 38th Street
New York, NY 10016
(212) 686-5522

ABOUT THE PUBLIC AGENDA FOUNDATION

The Public Agenda is a nonprofit, nonpartisan research and education organization that specializes in public understanding of complex policy issues. Founded over a decade ago by public opinion analyst Daniel Yankelovich and former Secretary of State Cyrus Vance, Public Agenda's indepth research probes beneath public opinion -- people's top-of-the-head reactions to issues -- to uncover public judgment -- people's views on issues when they have confronted them realistically and weighed the choices and tradeoffs they present. Public Agenda citizen education materials provide average Americans with imaginative and compelling means to understand complex issues for themselves. The organization has conducted research and prepared educational materials on a variety of public policy issues including nuclear arms and U.S./Soviet relations, rising health care costs, Social Security and retirement, social welfare reform, prison overcrowding, and the federal budget deficit.

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CHILDREN:

Childcare and Working Parents: Executive Summary (1983). John Immerwahr, Judith Golub, and Harvey Lauer. An examination of changing economic realities for married couples and single parents, including analysis of national survey data and indepth interviews with both childcare experts and working parents. Part of the multi-year project on jobs and work, "Jobs in the 1980's and 1990's". 22pp. Price: $5.00.

Community Leaders' Attitudes About Child Survival (1987). John Doble and Judith Kallick. Prepared for the U.S. Committee for UNICEF and the Carnegie Corporation. The report contains findings of a survey conducted with over 1,000 community leaders in five cities to assess their views about third world infant mortality. 57pp. Price: $10.00.

Children at Risk, Families at Risk: The Public's Perspective on Child Abuse and Neglect (Forthcoming, 1987). John Immerwahr and John Doble. Report on public misperceptions about foster care based on series on ten focus groups conducted across the country. Prepared for the Edna McConnell Clark Foundation.

Infant Mortality in the Third World: The Public's Reactions to Child Survival (1986). John Doble. A report for the U.S. Committee for UNICEF analyzing obstacles blocking citizens' consideration of ways to reduce infant mortality in developing countries, with recommendations for the Child Survival Campaign of UNICEF. 46pp. Price: $8.00.

CRIME AND CORRECTIONS:

Crime and Corrections: A Review of Public Opinion Data Since 1975 (1986). Mary Komarnicki and John Doble. Findings, detailed observations and tables of surveys from many sources organized into six sections detailing people's attitudes towards the criminal justice system, police, courts and prison system, and the causes and problems of crime. Prepared for the Edna McConnell Clark Foundation. 131pp. Price: $18.00.

Crime and Punishment: The Public's View (1986). John Doble. Prepared for the Edna McConnell Clark Foundation. A qualitative analysis of ten focus group discussions exploring people's opinions on crime and corrections, the rationale for their views, and their views on alternatives to incarceration as a means to reduce prison overcrowding. 85pp. Available from the Edna McConnell Clark Foundation, 250 Park Avenue, New York, NY, 10017 (212) 986-7050.

EDUCATION AND THE PUBLIC SCHOOLS:

SchoolVote: A Public Choice Campaign (1985). An information kit describing a citizen information campaign of issues facing the public schools conducted by Public Agenda with local media sponsors in 1985 in the greater Philadelphia area and in 1987 in Milwaukee. Contains press releases, storyboards, and sample materials from the campaign. Provides information on media participation, community and leadership involvement, and results of culminating SchoolVote "balloting." Price: $2.00.

SchoolVote Ballot Results (1985). Results of balloting from pilot SchoolVote campaign conducted in Philadelphia and the Delaware Valley in 1985 where 100,000 citizens "cast a vote" on choices regarding critical education issues including class size, teacher evaluation, and enriched programs for preschoolers. Price: $8.00.

ENGINEERING, SCIENCE, AND TECHNOLOGY:

Engineering and Technology: The Public's Perspective (1986). John Doble and Mary Komarnicki. A qualitative analysis of focus group discussions on the public's attitudes about engineers and engineering. Prepared for the National Academy of Engineering. 46pp. Price: $8.00.

Public Attitudes Toward Engineering and Technology (1986). Mary Komarnicki and John Doble. An analysis of existing opinion survey data on engineering and technology with detailed observations, tables, and survey questions and responses. Prepared for the National Academy of Engineering. 106pp. Price: $20.00.

Science Policy Priorities and the Public (1983). John Doble. A pilot study assessing the public's willingness and ability to participate in setting priorities for scientific research. Prepared in association with Harvard University for the National Science Foundation. 88pp. Price: $12.00.

HEALTH CARE COSTS:

Curbing Health Care Costs: The Public's Prescription (1983). John Doble, Jean Johnson, and Jeff Tuchman. Report on pilot citizen education campaign on rising health care costs -- HealthVote 82 -- conducted in Des Moines, Iowa. Contains data about public understanding of health costs before and after the information campaign and describes the communications activities that led to increased public knowledge of the issue. 80pp. Price: $6.50.

HealthVote: A Public Information Campaign. An information kit describing a citizen information campaign on rising health care costs conducted by Public Agenda with local media sponsors in cities across the country. Contains press releases, storyboards, and sample materials from the campaign. Provides information on media participation, community and leadership involvement, and results of culminating "balloting." in the cities. Price: $2.00.

HealthVote Ballot Results (1985). Detailed results of ballots from five HealthVote campaigns conducted in Dayton, Kansas City, Minneapolis, Peoria, and Raleigh in 1985 where citizens were asked to "cast a vote" on critical health care issues including care of low income citizens and the elderly, malpractice, and use of HMOs and similar alternatives. 20pp. Price: $5.00.

JOBS AND PRODUCTIVITY:

Jobs in the 1980's and 1990's: A Sourcebook for Policy Makers (1983). Harvey Lauer. Report of comparative studies conducted in the United States, Great Britain, West Germany, Japan, and Sweden on workers' attitudes about productivity, unemployment, worker incentives, and job satisfaction. Prepared as part of the "Jobs in the 1980's and 1990's" project. 359pp. Price: $15.00.

Managing for Motivation in a High Discretion Workplace (1983). Daniel Yankelovich. An examination of factors contributing to enhanced productivity, including a list of "dos and don'ts" for stimulating the work ethic. Prepared as part of "Jobs in the 1980's and 1990's" project. 43pp. Price: $5.00

New Technnology in the Workplace: A Quotebook of Opportunities and Options (1985). Mary Komarnicki. Highlights of findings of the "Technology and Human Resource" project, a study designed to explore ways to introduce new technology in the workplace to enhance worker acceptance and productivity. (102pp). Price: $10.00. Summary report available: $5.00.

People and the New Technologies: An Issue for Managers (1983). Franklin Lindsay, Jerome Rubin, and Richard Cohen. Paper presented at the 1983 Wharton/Reliance Symposium on "Removing Obstacles to Economic Growth" discussing interviews with managers and experts conducted for the "Technology and Human Resources" project. 46pp. Price $7.50.

Putting the Work Ethic to Work (1983). Daniel Yankelovich and John Immerwahr. A ground-breaking report on the state of the American work ethic and its relationship to America's economic vitality. Report is based on indepth interviews with 845 working Americans and includes findings from comparative studies conducted in Great Britain, West Germany, Japan, Israel, and Sweden. Published as the culminating report of the "Jobs in the 1980's and 1990's" project. Includes executive summary. 45pp. Price: 20.00. Bulk rates available.

Work in the 1980's and 1990's: A Series of Nine Articles Appearing in Working Woman Magazine (1983). Julia Kagan. Series of articles highlighting findings from the "Jobs in the 1980's and 1990's" project, with special emphasis of views of women in the work place. Focuses on working mothers and child care, job satisfaction and productivity, technology in the workplace, and retirement. 19pp. Price: $5.00.

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The Public, the Soviets, and Nuclear Weapons: An Information Kit (1987). Describes the multi-year joint effort of Public Agenda and the Center for Foreign Policy Development at Brown Univerisity to explore and enhance the public's role in development of the country's long term policies for nuclear arms and U.S./Soviet relations. Includes information about Public Summit '88, a citizen information campaign to be conducted in cooperaton local television and newspapers in four cities in January, 1988. Campaign asks citizens to think about both short-term and long-term options for relations with the Soviets. Single copies available free of charge.

The Public, the Soviets, and Nuclear Weapons: A Perspective from Community Leaders (1987). Report on series of workshops held with community leaders in ten cities examining issues such as deterrence, the Strategic Defense Initiative, and the spread of Marxism in the Third World. Conducted for "The Public, The Soviets, and Nuclear Arms," a joint project of the Public Agenda and the Center for Foreign Policy Development at Brown University. 62pp. Price: $10.00.

Voter Options on Nuclear Arms Policy: A Briefing Book for the 1984 Elections (1984). The Public Agenda Foundation and the Center for Foreign Policy Development at Brown University. Report based on a 1984 indepth study of Americans' views about nuclear arms, the Soviets, arms control, and communism in the Third World, and an analysis of opinion data on these issues since 1945. Outlines areas of consensus and confusion among Americans and contrast public opinion, elite views and existing policy options. 90pp. Price: $6.00. Technical Appendix: $10.00.

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Options for Social Welfare Policy: The Public's Views (1986). John Doble and Keith Melville. Examination of public knowledge and misperceptions about welfare policy based on series of six focus groups. Prepared for the Ford Foundation. 52pp. Price: $6.50.

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Survey of Attitudes of the Puget Sound Work Force on Economic Growth and the Work Place (1982). Introduction by William D. Ruckelhaus and Brewster C. Denny. Survey of 500 employed reisdents of three Puget Sound counties on work preference, living environment, economic growth, and worker commitment and productivity. Report provides insights into worker morale at small and large corporations and what workers view as important returns on a job. Survey covers "discretionary" worker effort and willingness to accept environmental trade-offs for economic growth. 110pp. Price: $15.00.

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